(Print Name of lobbyist)

STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

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PLEASE PRINT

JAN 1 0 2018

_	4			- 4 5010
I. Name of Lobbyist(s)	YEITH	KUENHI	NG	NEW HAMPSHIRE DEPARTMENT OF STATE
II. Name of lobbyist's partners	hip, firm or corpora	tion, if any:		OF STATE
(HTIN GI	ua7 b	ELY JEDIVIC	L S	
(Name of partner	ship, firm or corporation			-
164 CHETOUR	ST. MA	N(HESTEN	H.	03105
Business Address: (Street)	(Tow	n/City)	(State)	(Zip Code)
(5) 5 18 - LW45 (Telephone)	()	(Fax) e-r	nail KLE N.	UIVALLEC PSUH, ONE
III. This statement covers: (Che reportable expense transactions				ay file a separate report for
All reportable transactions oc	1 1	prior to the reporting da	ate relative to th	ne following client:
(Full Nam		on the Lobbyist Registrati	on Form)	
<u>OR</u>				
All reportable transactions by unrelated to any particular client.	the lobbyist (includin	ng the lobbyist's family),	or the lobbying	g firm listed below which are
	, 2017 [] c of registration to 3/31		6, 2017 🛘 4/1/17 to 6/30/17	,
	25, 2017 1 17/1/17 to 9/30/17		ry 31, 2018 🗌 10/1/17 to 12/31	/17
V. There have been no fees r If this box is checked, complete ju Concord, NH 03301.				
VI. Check if additional reports	are attached:			
If you have received fees or r		ou must file Addendum	A- Fees and E	xpenses
☐ If you have paid an honorariu Expense Reimbursement				
☐ If you, your firm, or your fan	ily has made politica	al contributions, you mus	st file Addend u	m C-Political Contributions
Sworn Statement/Affirmation by I have read RSA 15, RSA 15-B, I and complete to the best of my kr (Signature of lobbyist)	RSA 14-C and RSA 6	64 and hereby swear or	affirm that the t	foregoing information is true

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STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

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(RSA Chapter 15:6)

11153	(KSA CR	apter 15:0)	JAN 1 0 2018
I. Name of Lobbyist(s)	. FTH KNE,	INF N.C.	NEW HAMPSHIRE DEPARTMENT OF STATE
II. Name of lobbyist's partnership	, firm or corporation, if a	ıy:	
(Name of partnership, firm	FAMILY SE	アトエイグ	
(Name of partnership, firm	n or corporation)	<	10 10 5
III. Name of Client CHILY	and FAMIL	Date_	(2.)()4
IV. Fees Received Indicate the gross amount of all fees re to lobbying, including fees for service including research, monitoring legisla reduced by any expenses:	s such as public advocacy, go	vernment relations, or p	oublic relations services
a) Total of all fees received in this rep	orting period	a) \$	
b) Total of all fees received this calen (This should equal the total of all p			
c) Total of all fees received to date (Add lines a and b)		c) \$	
d) Indicate the amount of any such fee yet been paid	es that are due, but have not	d) \$	
V. Expenses: Lobbyist(s)/Lobbying partnerships, fir fees. Separate reports are to be filed the lobbyist(s)/firm that are unrelated Expenses are to be reported in one of during the reporting period for salaric individual expenses where the expend lunch where the cost was \$25.00 or lebeing lobbied, purchase of a ceremoni (c) an itemized statement of each individual purpose not covered by (a) (for ceremonial object to be given to the restaurant expenses for a legislative recontributions will be reported on separate	for expenditures made relative I to any one client a separate of three categories of expense es, benefits, support staff, and iture was of \$25.00 or less (for ss, purchase of a pen with a val al object given to a person be ridual expenditure made during example: purchase of a meal subject of lobbying with a val reception). Expenses for hor	e to each client and if exerper to the report may be filed for the aggregate to the confice expenses; (b) the process of the confice expenses; (b) the confice expenses; (b) the confice expenses; (b) the confice expenses; (c) the confice expenses of the confice expenses	rependitures are made by for the lobbyist(s)/firm. tal of all expenses paid the aggregate total of all thased during a business that is given to the person the of \$25.00 or less); and of greater than \$25.00 for than \$25, purchase of a tut not greater than \$50, the political
a) Total aggregate expenses for this resupport staff, and office expenses, rela	ted directly or indirectly to lob		5840
b) Total aggregate of expenditures durin a), of \$25 or less.	ring this reporting period, not	b) \$	
c) Total of all itemized expenditures r	eported in detail in section VI.	c) \$	

d) Total expenses for this reporting period (Add lines a, b and c)	d)s 2584 00				
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$				
f) Total of all expenses year to date	f) \$				
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from lobbying fees during this reporting period, including by whom paid or to whom charged.					
Paid to:	Amount:				
	\$				
<u> </u>	\$				
	\$				
	\$				
	\$				
	\$				
Sworn Statement/Affirmation by Lobbyist					
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm	n that the foregoing information				
is true and complete to the best of my knowledge and belief.	R. 12. 77-				
(Signature of lobbyist) KENNING	(Date)				
(Print Name of lobbyist)					